DOCUMENT RESUME

ED 477 434 PS 031 325

AUTHOR	Silver, Michael, Ed.; Zito, Michael, Ed.
TITLE	Bridges, 2002.
INSTITUTION	California State Dept. of Education, Sacramento. Head Start-State Collaboration Office.
SPONS AGENCY	Administration for Children, Youth, and Families (DHHS), Washington, DC.; California State Dept. of Education, Sacramento. Div. of Child Development.
PUB DATE	2002-00-00
NOTE	30p.; One issue published in 2002. For 2001 issue, see ED 458 037.
AVAILABLE FROM	California Head Start-State Collaboration Office (CHSSCO), Child Development Division, 560 J Street, Suite 220, Sacramento, CA 95814. Tel: 916-323-9727; Fax: 916-323-6853; e-mail: mzito@cde.ca.gov. For full text: http://www.cde.ca.gov/cyfsbranch/child_development/headstart.htm.
PUB TYPE	Collected Works - Serials (022)
JOURNAL CIT	Bridges, 2002.; v7 n1 Sum 2002.
EDRS PRICE	EDRS Price MF01/PC02 Plus Postage.
DESCRIPTORS	Child Caregivers; Early Childhood Education; Educational Quality; Emergent Literacy; Inclusive Schools; Mathematical Concepts; Mental Health; Obesity; Organizations (Groups); *Partnerships in Education; Preschool Education; Preschool Teachers; *Professional Development; Special Needs Students; *State Programs; Student Adjustment ; Young Children
IDENTIFIERS	California; Even Start; *Project Head Start

ABSTRACT

This document is comprised of the one issue in volume 7 of "Bridges," a publication produced by the California Head Start-State Collaboration Office to detail the activities of the educational partnership and to provide relevant information to programs participating in the partnership. The Summer 2002 issue focuses on several topics of interest to educational partnerships, including: (1) transition to school; (2) childhood obesity; (3) child care health consultation; (4) services for children with developmental challenges in inclusive settings; (5) mental health services for children; (6) early literacy activities; (7) research on mathematics in early childhood; and (8) partnerships of Head Start with higher education. The issue also delineates regional resources and web resources, presents news from the California Head Start Association, and highlights award-winning Head Start and Early Head Start programs in the state. (KB)

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ED 477 434

Bridges, 2002.

Volume 7, Number 1, Summer 2002.

Michael Silver, Ed.
Michael Zito, Ed.

California Head Start-State Collaboration Office, California Department of Education.

2002

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1

BRIDGES

CALIFORNIA HEAD START-STATE COLLABORATION OFFICE

Message from the California Head Start–State Collaboration Office

by Michael Silver, Director, and Michael Zito, Coordinator

Typically, each issue of *Bridges* focuses on one particular topic. However, in this issue we look at several topics, including early literacy, childhood obesity, and services for children with developmental challenges.

For the past few years, a number of federal and state initiatives and activities have addressed early literacy, including Even Start, HeadsUp! Reading, Head Start's Project STEP and CIRCLE, the President's No Child Left Behind Act, Early Steps to Reading Success, and Governor Davis' Reading Initiative. This issue of *Bridges* includes articles submitted by local program staff showing how they make several of these initiatives work for the families they serve.

In this issue we look at several topics, including early literacy, childhood obesity, and services for children with developmental challenges.

News from the California Head Start Association

by Patricia Stroh, Ph.D.
CSHA President, 2002–2004

Greetings from the California Head Start Association! On behalf of the 2002–2004 Executive Committee and as the newly elected president of the CHSA, I am excited to share with you news from the association. The leadership of CHSA is committed to providing dynamic and necessary resources to California's early care and education community.

Head Start is a critical provider of services, a strong advocate for children and families, and an essential partner in the development of children who are preparing for elementary school success. The 2002–2004 Executive Committee members—the president, vice president, secretary, and treasurer—reflect the very diversity and professionalism found throughout California's Head Start community.

Head Start is a critical provider of services, a strong advocate for children and families, and an essential partner in the development of children who are preparing for elementary school success.

As president, I am currently engaged in a number of efforts in the field of early childhood education. I am the director of the Community Services Department, Family and Community Services for Contra Costa County, which serves nearly 3,000 children in Early Head Start, Head Start, and State Preschool/General Child Care. I have been an active member of the National Head Start Association, Region IX Head Start Association, and CHSA. In addition, I am a member of the Contra Costa County Local Planning Council and the Contra Costa County Children and Families Commission.

Our vice president, Dr. Adolfo Munoz, is the director of Orange County Head Start. As the former vice president of Development Associates for more than 22 years, Dr. Munoz has extensive experience in the development and management of training and technical assistance.

Barbara Fielding, our new CHSA secretary, has been the director of the San Diego Head Start for 27 years. Barbara is well-known in California and throughout the country. Under her

(Continued on page 27)

In our next issue we intend to report on the results of the first Region IX Oral Health Summit held in Oakland in June 2002. The summit participants developed a regional plan to improve access to dental resources for Head Start families and to decrease barriers to oral health education and prevention. The summit was sponsored by the federal Administration for Children and Families, Health Resources and Services Administration, and Center for Medicare and Medicaid Services.

Finally, we hope you will fill out and send back to us the survey we have included in this issue to let us know how we are doing and to help us plan future issues of *Bridges*.

This issue of *Bridges* can be found at the Child Development Division's World Wide Web site. Point your browser to <http://www.cde.ca.gov/cyfsbranch/child_development/headstart.htm>.

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California Head Start-State Collaboration Office Update

Since the last issue of *Bridges*, California Head Start-State Collaboration Office (CHSSCO) has been involved in many activities:

- Assisted a team from the Sacramento Employment and Training Agency (SETA) Head Start in collaboration with Region IX (serving Arizona, California, Hawaii, Nevada, and the Outer Pacific) Administration for Children and Families (ACF), the California Head Start Association (CHSA), Region IX Quality Improvement Center, and California Department of Education's Child Development Division (CDE/CDD) in developing, piloting, and conducting regional training events throughout California on the Desired Results Developmental Profile Plus (DRDP+) that meets both federal and state Head Start and child outcome requirements.
- Assisted Region IX ACF and CDE/CDD in producing a joint letter to the field supporting full-day, full-year partnerships.
- Worked with the state Department of Developmental Services, Region IX ACF, and Quality Improvement Center on Disabilities Services to complete a Memorandum of Understanding for Early Head Start and the state Early Start program.
- Facilitated the Collaborative Partners Work Group, whose report on full-day, full-year service recommendations is now being published.
- Conducted a series of roundtables throughout the state with CHSA, Region IX Quality Improvement Center, and clusters of local representatives regarding local partnerships.

(Continued far right column on next page)

Transition to

Summer is the time of year when parents begin to think about enrolling their young children in kindergarten class.

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School

Transition to School

Summer is the time of year when parents begin to think about enrolling their young children in kindergarten class.

There is much that parents and teachers can do to make the upcoming school year rewarding and comfortable for children starting school. Research shows that young children, especially those at risk of school failure, will sustain the academic, social, and emotional gains they have made in quality child development and preschool programs when they experience a positive transition to elementary school.

Following a presentation at a Santa Clara County school during which backpacks containing educational materials were distributed to soon-to-be kindergartners, a parent commented, "My son didn't want to start kindergarten, but the backpack filled with school supplies made him want to." The materials, which could be used by the child all summer, would be familiar to the child when he saw them at school, thereby easing his transition.

"My son didn't want to start kindergarten, but the backpack filled with school supplies made him want to."

The Transition to School Project, a pilot project conducted during the 2001-02 school year, helped disadvantaged children in low-performing schools get off to a good start in kindergarten. The project was administered by the San Joaquin County Office of Education and funded by the Elementary Education Office of the California Department of Education. The project included more than 17,500 incoming kindergartners in 158 elementary schools in 30 counties.

Participating schools were selected from those scoring in the bottom two deciles of the 1999 and 2000 Academic Performance Index (API) reports. Priority was given to schools with

(Continued on page 26)

Even Start and Transition to Kindergarten

By Bertha A. Guzman de Jasso
Alisal Even Start, Monterey County

The Alisal Even Start Family Literacy Project provides a bridge for the preschool child to make the transition to elementary school. The services are provided by the Alisal School District as well as community-based organizations and agencies and by the Monterey County Head Start Program and state preschool programs. Alisal School District includes these programs in four of its nine schools. In addition, the district encourages its families to participate in Even Start and Healthy Start programs. These programs serve families with children from birth through seven years of age. The collaboration between these service programs has proven to be extremely beneficial to the students and their families.

Examples of the type of activities the programs provide are as follows:

- Head Start and preschool classes are invited to visit the kindergarten classrooms several times a year.

(Continued on page 27)

CHSSCO Update

(Continued from page 2)

- Cosponsored the annual Family Literacy Conference held in Santa Clara in March.
- Funded a side-by-side comparison of the state's Coordinated Compliance Review monitoring system and the federal Program Review Instrument for Systems Monitoring (PRISM). To be released soon, this comparative document is intended to assist agencies that are funded by both CDE/CDD and Head Start to prepare for state and federal monitoring visits and to conduct self-reviews.

CHSSCO has also submitted its new five-year grant application to the Region IX office of the ACF. (Each collaboration office must reapply once every five years.) The application received the required support from the Governor's office and California Head Start Association as well as letters of support from several other partners. CHSSCO will continue to work hard to merit their trust and backing.

For the next five years, CHSSCO is committed to achieving outcomes in three broad areas:

- Improved awareness among the early care and education community regarding best practices
- Enhanced coordination among Head Start and all state agencies serving children and families
- Reduced institutional barriers that restrict access to or delivery of comprehensive early care and education

We thank the Advisory Committee and other stakeholders for their collaborative work with CHSSCO during the past several months in developing the desired outcomes and next year's work plan, which emerged from these outcomes. The work plan may be viewed by scrolling to "Head Start Collaboration" at <*www.cde.ca.gov*>.

Michael Silver, Director, and
Michael Zito, Coordinator, CHSSCO

Early Care Programs Can

By Robert Frank, M.S.
California Child Care Health Program
(A community-based organization affiliated with the University of California, San Francisco School of Nursing, Department of Family Health Care Nursing)

Parents and early care service providers must consider ways, especially physical activity, of preventing childhood obesity to reduce health risks in children.

Current research indicates that obesity has increased dramatically for children in the United States over the last decade, according to Allison Lorenz, a Humboldt County Child Care Health Consultant. Although all racial groups have shown significant increases in their population of overweight children, Hispanic boys and girls are the most likely to be overweight.

Since 1980 the prevalence of overweight and obese children and adolescents in the nation has nearly doubled. The Centers for Disease Control and Prevention (CDC) estimates that 23 percent children in the United States, roughly one in four, are overweight. James Schlosser indicates in his new book, *Fast Food Nation* (Houghton Mifflin Co., 2001), that the rise of the obesity rate in the United States has grown "pretty much in step with the rise in fast-food consumption." Serving portions have increased in size, leading to people eating more food that contains more fat. An order of a large hamburger, super-size fries, and a large glass of coke at a well-known fast-food franchise now packs 1,500 calories, 40 percent of which is fat.

According to Schlosser, enticements to purchase large orders of fast food started innocently enough—by giving a toy with the meal. This kind of marketing can be potentially harmful. Note that the ingredients of the fast-food meals being marketed heavily to children are extremely high in fat, sugar, and salt. Childhood obesity may have a life-long impact on health by contributing to high blood pressure, diabetes, stroke, heart disease, certain kinds of cancer, and undue stress on weight-bearing joints.

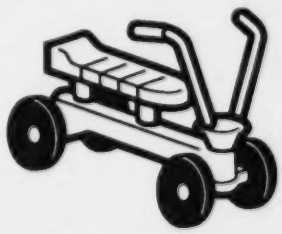
Parents and early care service providers must consider ways, especially physical activity, of preventing childhood obesity to reduce health risks in children. Staff in Head Start and state-funded preschools must, therefore, think about educating children and families on making healthy meal choices for good nutrition and providing consistent encouragement and support for exercise and other physical activities to get overweight children moving.

Obesity has become an epidemic among children. The Pediatric Clinic at Yale University is on the front lines in

Physical Activity Guidelines for Infants and

Confining babies and young children in strollers, playpens, and car and infant seats for hours at a time may delay cognitive and motor development, such as rolling over, crawling, and walking. Certainly, such restrictions can be the beginning of a path to sedentary preferences and childhood obesity, warns the National Association for Sport and Physical Education (NASPE). Infants should be encouraged to be physically active from the beginning of life. That is the recommendation of NASPE in the first physical activity guidelines (released February 6, 2002) specifically designed to meet the developmental needs of infants, toddlers, and preschoolers. Although the relationship between physical activity and health in older children and adults has been highlighted in the last decade by various national health organizations and government agencies, the importance of physical activity for infants, toddlers, and preschoolers has not been addressed until now.

Dr. Jane Clark, professor and chair of the Department of Kinesiology at the University of Maryland, chaired the NASPE Early Childhood Physical Activity Guidelines Task Force, whose membership included motor development experts, movement specialists, exercise physiologists, and medical professionals.



Influence Childhood Obesity

the war against obesity in children. The clinic's Mary Savoye, a registered dietician, says, "We have kids coming in now—ten-year-olds—who are being diagnosed with diabetes. Type 2 diabetes was something people got when they were 40 because they were overweight. Now we see 10-, 11-, 12-year-olds . . . with the same issues." With this information about the increasing rate of childhood obesity, parents and early care staff must respond immediately in fundamental ways to help reduce risks of obesity in children.

According to Nancy E. Sherwood, Ph.D., Division of Epidemiology, University of Minnesota, "Obesity is a major public health problem in the United States." The alarming increase in cases of obesity over the last few decades has raised concerns about associated health risks for children, adolescents, and adults. Recent data suggest that the estimated number of annual deaths in the nation because of adult obesity approaches 300,000. The number is far lower for children, but if childhood obesity is not dealt with and no lifestyle changes are made, many children will likely become obese adults. Persistence of this trend toward obesity, particularly among youths, could lead to a further increase in the number of people with obesity-related health conditions and premature mortality.

Obesity is also associated with psychological-social problems, such as depression, low self-esteem, and binge-eating (i.e., eating out of control as a coping mechanism). Furthermore, individuals who are obese may be adversely impacted by social bias and discrimination. Adolescents, in particular, may be subject to peer rejection and bullying. Obesity may also be a family problem: overweight children with at least one obese parent or sibling are

(Continued on page 7)

Toddlers

The NASPE document provides teachers, parents, caregivers, and health care professionals with guidelines that address infants' and toddlers' physical activities and environment and the persons responsible for facilitating the physical activities.

"Adopting a physically active lifestyle early in life increases the likelihood that infants and young children will learn to move skillfully," says Dr. Clark. "Promoting and

(Continued on page 11)

The importance of physical activity for infants, toddlers, and preschoolers has not been addressed until now.

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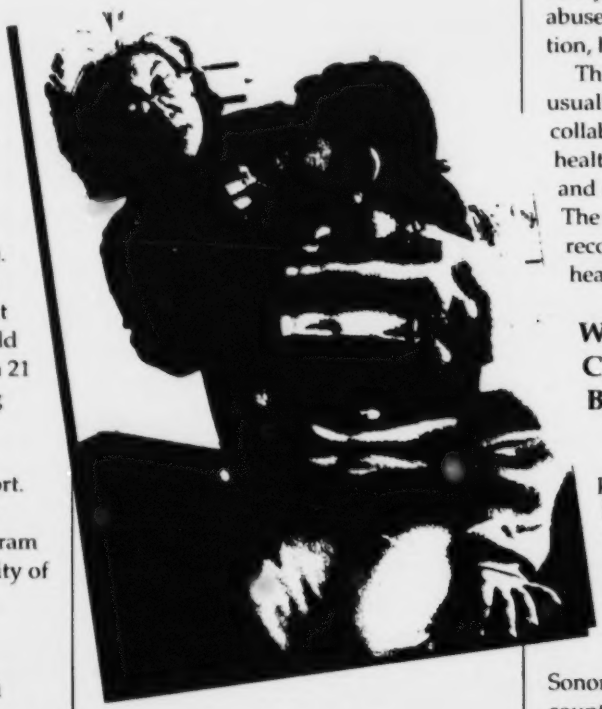
Child Care Health Consultation:

By Abby Cohen, Region IX,
State Technical Assistance Specialist
National Child Care Information Center

Across the country there is a growing movement to establish child care health consultation programs that work to improve the quality of child care by focusing on health and safety issues. California has long been a leader in this area,[1] but only a few counties have been fortunate enough to benefit from this type of assistance. However, in recent months child care health consultation efforts have taken a quantum leap with the support of the California Children and Families Commission (State Proposition 10). The commission is supporting the Child Care Health Linkages Project (CCHLP), which is developing child care health consultation projects in 21 counties across California, training and supporting child care health consultants and child care health advocates, and evaluating this effort. The project is administered by the California Child Care Health Program under the direction of the University of California, San Francisco (UCSF), School of Nursing.[2]



What Is Child Care Health Consultation?

The California Child Care Health Linkages Project model of health consultation relies on a network of child care health consultants and child care health advocates who deliver services to all types of child care programs. The child care health consultant is a licensed health professional, usually a nurse, who helps child care programs identify their health and safety needs and develop policies and procedures that promote healthy and safe child care environments. The many activities that child care health consultants might undertake include the following:

- Making site visits to child care programs to conduct health and safety assessments
- Organizing a workshop or training session on particular health and safety issues important to child care staff members, parents, and/or children
- Coordinating health, dental, or vision screenings for children in child care
- Providing programs with current health and safety information, resources, and research
- Providing linkages and referrals to community services

Child care health consultants typically are able to consult on issues as wide-ranging as immunization status, playground safety, child passenger safety, behavior, child nutrition, child abuse, infection control, injury prevention, health care access, and others.

The child care health advocate is usually a child care teacher who works collaboratively with the child care health consultant to promote health and safety in child care environments. The health advocate implements the recommendations of the child care health consultant.

Where and How Is Child Care Health Consultation Being Piloted?

The counties participating in the pilot project are Alameda, Colusa, Humboldt, Inyo, Kern, Lake, Los Angeles (partial), Marin, Mendocino, Napa, Sacramento, San Benito, San Francisco, San Luis Obispo, Santa Clara, Shasta, Sierra-Nevada, Siskiyou, Sonoma, Ventura, and Yolo. In most counties this service will be a new or relatively new service; in a few counties the pilot project will provide support for consultation that has already been established. Some of these operating programs are supported with local Proposition 10 monies. There are also projects in Long Beach, Orange, San Diego, Santa Barbara, and San Bernardino Counties operating with other funding sources.

Child care health consultation is generally provided by a public health nurse who is employed by either the local public health department or a community agency. These nurses may be located at the public health department or at the local child care resource and referral agency. All child care

[1] In the 1970s the Santa Clara County Health Department's Public Health Nursing Division was already targeting health and safety information directly to the child care community.

[2] The California Child Care Health Program is California's Healthy Child Care America grantee through the Maternal and Child Health Bureau of the federal government. This federal initiative seeks to link child care and health care and, through a contract with the University of North Carolina, has developed a train-the-trainer curriculum for child care health consultation.

California Here We Come!

health consultants funded by CCHLP are participating in three training modules developed by the California Child Care Health Program and adapted from a curriculum developed by the National Training Institute for Child Care Health Consultants. This latter entity is funded by the Maternal and Child Health Bureau of the federal government and is responsible for training teams of trainers from states that apply to participate. California trainers were among the first to be trained.

Child care health consultation is generally provided by a public health nurse who is employed by either the local public health department or a community agency.

The California Child Care Health Program is providing technical assistance and support to all counties funded under the Linkages Project and to nonfunded counties that have already developed, or are interested in developing, child care health consultation projects.

How Will the Project Be Evaluated?

The UCSF School of Nursing is conducting the research component of the Linkages Project. A formative evaluation will describe health consultation services, the facilitators of and barriers to consultation services, and the linkages established between child care and health agencies. An in-depth outcome evaluation will study five counties to determine the impact of health and safety consultation on children's health status and on centers' compliance with health and safety standards. Finally, the training of consultants will be evaluated to track the consultants' knowledge using pre- and post-test measures.

Where Can More Information Be Obtained?

To learn more about the Child Care Health Linkages Project or the local county projects, contact:

California Child Care Health Linkages Project
1322 Webster Street, Suite 402
Oakland, CA 94612
(510) 839-1195
<http://www.childcarehealth.org>

For more information about the Healthy Child Care America Initiative sponsored by the federal Maternal and Child Health Bureau, contact the Healthy Child Care America program manager at the American Academy of Pediatrics either by e-mail at *<childcare@aap.org>* or by telephone at 1-888-227-5409. Information can also be found at the Web site *<http://www.nccic.org>*. From this site's home page, click on the link "Healthy Child Care America," which appears on the lower half of the page.

Early Programs Can Influence Childhood Obesity

(Continued from page 5)

especially at risk of becoming obese themselves.

The California Health Program's newsletter *Child Care Health Connections* (March-April 2001) describes strategies for preventing childhood obesity. The article in the newsletter, which can be downloaded at *<www.childcarehealth.org>*, states that childhood obesity is dangerous because it sets the stage for adult health problems later in life. Early caregivers in Head Start and state-funded preschool programs need to be aware of child and family nutrition habits and the ratio of active play to eating in preventing unhealthy weight gain.

Author Gail Gonzales, a registered nurse, emphasizes, "It's critical to encourage physical play. Teachers and caregivers must lead and model activities, such as walking, running, marching, dancing, swimming, climbing, or any activity that makes you breathe harder and makes your heart beat faster."

When working to encourage weight reduction in children, it is extremely important for parents and early care staff to encourage healthy changes in lifestyle and habits, in which children experience not only physical health advantages but also an increase in emotional wellness. Adults responsible for children's welfare must encourage play and family activities that involve exercise-related activities and provide foods that are low in fat and calories, including low-fat or nonfat dairy items and lots of fruits and vegetables. Instilling in children healthy eating habits early in life leads to a healthy family legacy that will benefit future generations.

Early care programs can benefit greatly when staff work closely with a nutritionist or a child care health consultant in monitoring children's meal menus for proper balance and in presenting workshops and training opportunities to parents and caregivers on nutrition and exercise. Although a nutritionist or health professional may counsel a family suffering from the effects of obesity, the caregiver is the one who can help break the cycle of obesity by making referrals. This kind of *head start* begins with the early care community.

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   - Talk with parents about the need and availability of affordable health coverage. Emphasize why it's important for a child's health and learning.

What can schools do?

1. **Offer staff training and information** on affordable health coverage for families. Include in the orientation:
   - teachers and aides
   - bus drivers
   - front office, janitorial and lunchroom staff
2. **Ask your food services director to include information** in the Free and Reduced Price Meal Applications and on lunch menus. Request For Information (RFI) flyers are available in 11 languages and free of charge by contacting School Health Connections.
3. **Print material in your newsletter.**
4. **Use bulletin boards and the front office counter** to display information. Call **1-888-237-6248** for display boards/pads and posters.
5. **Link up with a Healthy Start site**, community organizations and other health-related staff for more information or help.

For additional materials or to learn more about how to get involved, contact School Health Connections at 916/653-7746.

www.dhs.ca.gov/schoolhealth
School Health Connections
California Department of Health Services

CALIFORNIA SchoolHealthConnections

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California Kids* (for undocumented children)
1-800-374-4KID

*Not affiliated with or endorsed by the State of California. Eligibility is based on family size and income.

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Physical Activity Guidelines for Infants and Toddlers

(Continued from page 5)

fostering enjoyment of movement and motor confidence and competence at an early age will help to ensure healthy development and later participation in physical activity."

Five guidelines for infants and five for toddlers and preschoolers deal with physical activities, the environment for activities, and the adults responsible for facilitating such activities.

Guidelines for Infants

Part of the infant's day should be spent with a caregiver or parent who provides systematic opportunities for planned physical activities, including a variety of such baby games as peek-a-boo and pat-a-cake. The caregiver or parent should also incorporate sessions for holding and rocking the child and for carrying the child to new environments.

Guideline 1. Infants should interact with parents and/or caregivers in daily physical activities that are dedicated to promoting the exploration of their environment.

Guideline 2. Infants should be placed in safe settings that facilitate physical activity and do not restrict movement for prolonged periods of time.

Guideline 3. Infants' physical activity should promote the development of movement skills.

Guideline 4. Infants should have an environment that meets or exceeds recommended safety standards for performing large-muscle activities.

Guideline 5. Individuals responsible for the well-being of infants should be aware of the importance of physical activity and facilitate the child's movement skills.

Guidelines for Toddlers and Preschoolers

The basic movement skills of a toddler or preschooler, such as running, jumping, throwing, and kicking, do not appear just because the child grows older; they emerge from an interaction between hereditary potential and movement experience. These motor activities are also clearly influenced by the child's environment. For instance, a child who does not have access to stairs may be delayed in stair climbing, and a child who is discouraged from bouncing and chasing balls may lag in hand-eye coordination.

Guideline 1. Toddlers should accumulate at least 30 minutes daily of structured physical activity; preschoolers at least 60 minutes.

Guideline 2. Toddlers and preschoolers should engage in at least 60 minutes and up to several hours per day of daily, unstructured physical activity and should not be sedentary for more than 60 minutes at a time except when sleeping.

Guideline 3. Toddlers should develop movement skills that are building blocks for more complex movement tasks; preschoolers should develop competence in movement skills that are building blocks for more complex movement tasks.

Guideline 4. Toddlers and preschoolers should have indoor and outdoor areas that meet or exceed recommended safety standards for performing large-muscle activities.

Guideline 5. Individuals responsible for the well-being of toddlers and preschoolers should be aware of the importance of physical activity and facilitate the child's movement.

During the preschool years children should be encouraged to practice movement skills in a variety of activities and settings. Instruction and positive reinforcement is critical during this time to ensure that children develop most of these skills before entering school.

According to NASPE Executive Director Judy Young, Ph.D., "Because children are not small adults, these activity recommendations are based on the developmental characteristics of children. For instance, children develop skills through involvement in physical activity, and parent involvement plays a significant role in children developing motor competence and enjoying physical activity. Only through devoting time to these skills will they become a regular part of a healthy lifestyle. Children and youths who do not participate in adequate physical activity are much more likely to be sedentary as adults than children and youth who are active."

Nazrat Mirza, M.D., a general pediatrician at Children's National Medical Center in Washington, D.C., says that decreased physical activity and increased sedentary activities, such as watching television and playing computer and video games, have caused the rapid rise of obesity in children and adolescents. Dr. Mirza further says that "promoting positive behaviors early in childhood may lead to persistence of these behaviors into adulthood—helping alleviate the problem of obesity."

For a copy of the full NASPE document (stock number 304-10254), call 1-800-321-0789. A copy costs $10 for NASPE/AAHPERD members; $13 for nonmembers.

For online information on NASPE—a nonprofit membership organization of over 25,000 professionals in the fitness and physical activity fields—visit <*www.aahperd.org*>, Web site of the American Alliance for Health, Physical Education, Recreation and Dance (AAHPERD).

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Beginning Together

Caring for Infants and Toddlers with Disabilities and Special Needs in Inclusive Settings

By Linda Brault, Project Director

Child care and Early Head Start providers throughout California continue to request additional information, training, and support in caring for infants and toddlers with disabilities or other special needs in inclusive settings.

The Program for Infant/Toddler Caregivers (PITC), a collaborative effort of the California Department of Education, Child Development Division (CDE/CDD), and WestEd, Center for Child and Family Studies, is a program that seeks to improve the quality of care for infants and toddlers. PITC has consistently identified the subject of children with special needs as one of the areas least frequently presented in its training sessions. Through surveys of PITC trainers, the trainers disclosed their concern that they would be fully responsible for providing information about children with special needs but would not have the background to support such information.

To address the need for support in the inclusive care of children with special needs, the California Institute on Human Services (CIHS), Sonoma State University, in collaboration with CDE/CDD and WestEd, created the program Beginning Together: Caring for Infants and Toddlers with Disabilities and Special Needs in Inclusive Settings. Established in 1999, the program is funded by CDE/CDD with a portion of the federal Child Care Development Fund allocated for quality improvement.

Beginning Together focuses on building quality caregiving practices for *all* infants and toddlers and provides the information and skills needed by PITC trainers to include infants and toddlers with disabilities and special needs in various settings. The program is built on the relationship-based approach of PITC to providing child care that is individualized, culturally sensitive, and responsive to the child's cues and desire to learn. The issues of quality care already embraced by the PITC trainers are recognized as equally important for children with disabilities.

The overall goal of Beginning Together is to increase the PITC graduates' capacity to deal with the needs of infants and toddlers with disabilities. This goal is achieved through the following activities:

- A training of trainers institute for the existing cadre of PITC certified trainers
- Regional outreach events throughout California
- Support of PITC demonstration programs
- Revision and development of products

Through all its activities Beginning Together models partnerships among child development specialists, early childhood special educators, and families who have children with disabilities or special needs. Participants are encouraged to develop a plan for accessing resources in their community and training on issues in partnership with professionals in different fields, parents of children with disabilities, and adults with disabilities.

I feel this is such a needed project. California really is focusing on providing early intervention services to children with special needs in "natural environments"! This means parents will have more choices as to where their child attends a program. A large part of this picture is working with child care programs so they are comfortable with children with special needs.

From a participant's evaluation Beginning Together Institute

Beginning Together Institute

All PITC-certified graduates are welcome to attend the Beginning

Together training of trainers institute. No previous knowledge or training in the area of special needs is required for attendance. Held once or twice each year, this institute features a variety of sessions conducted in the course of four days. Participants derive the following benefits:

- Learn to design lessons based on the key concepts presented in the workshops.
- Expand and strengthen their knowledge of community resources and ability to link with appropriate specialists of other disciplines for collaborative training.
- Increase their ease and competence in relating to parents of children with special needs and partnering with those parents and persons with disability as copresenters in training institutes.
- Incorporate information about infants and toddlers with disabilities and other special needs into their existing PITC training of child care providers.

Faculty teams conduct training that models a partnering strategy for use in subsequent training. Faculty and panelists include early childhood special educators and early intervention specialists, PITC early childhood faculty, Child Development Division staff, family members of children with disabilities and other special needs, and adults with disabilities.

The staff (including parents) are wonderful resource people who opened my eyes to the fact that child care providers can and must serve children with disabilities. We don't have to be experts; we already do much of what is needed to serve all children.

From a participant's evaluation Beginning Together Institute

Regional Events

In collaboration with PITC, these regional outreach events are held throughout California to develop and support connections among the graduates of Beginning Together institutes, early childhood caregivers, early intervention staff, and family resource centers. The events encourage early childhood and early intervention systems to form partnerships for collaborative and inclusive training and technical assistance in their communities, leading to increased inclusive experiences for young children with special needs and their families. Beginning Together graduates also receive additional ongoing technical assistance at these events.

Support of PITC Demonstration Programs

Beginning Together staff support PITC programs that demonstrate inclusive practices for children with special needs in their settings. Staff also work with PITC regional trainer coordinators to promote and support inclusive practices in their region and to share information through conference presentations and newsletter articles and other writing.

Product Revision and Development

In the coming year Beginning Together will be developing products for use in training and outreach activities. It will also update *Project EXCEPTIONAL*, a widely used curriculum for training child care providers who include children with disabilities in their settings.

More information about Beginning Together, including a comprehensive *Links* page with many resources for inclusive practices, is available on the Beginning Together Web site at <*www.sonoma.edu/cihs/BT/Beginning.html*>. Information about PITC may be found at <*www.pitc.org*>.

How can I adequately support the growth and development of children with special needs in a group setting?

How do I incorporate early intervention practices and professionals into the daily routines of child care?

I seem to be in the role of a clearinghouse about young children with special needs—identifying resources (locally or statewide) to assist college students, providers, parents, etc. How can I find the information I need?

The greatest barriers to including infants/toddlers with disabilities in caregiving settings include fear, lack of training, and the scarcity of professional trainers to provide ongoing support for staff so that they can address this fear and begin to feel that they can adequately meet the needs of ALL children.

From applications of participants Beginning Together Institute

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th Services for Young Children

By Alberto Orellana, M.A.
Manager, Mental Health Unit,
Family and Children's Services
Contra Costa County Community
Services Department

Preschool and child development programs are aware of those young children in their care who present severe behavioral problems and who find it hard to adjust to their social environment. These are children who may be angry, disruptive, withdrawn, or depressed. Often, these children's lives have been affected by divorce, loss of a parent, drug use, or domestic violence. They may have been abused or neglected, and their early traumatic experiences have interrupted their emotional growth and left them unable to form attachments and trust adults.

To address the needs of these children, the Mental Health Unit of the Family and Children's Services (FACS), a division of the Contra Costa County Community Services Department that operates the federally funded Head Start and the state-funded child development programs, has developed a Mental Health Internship program funded primarily by MediCal. FACS and the Contra Costa County Mental Health Department signed an agreement detailing FACS's Mental Health Unit as a MediCal satellite program.

To qualify for mental health services under MediCal, a child needs to meet certain "medical necessity criteria" and exhibit emotional and social impairment as determined by a clinician. The child must also be financially eligible for MediCal services or have the Healthy Families insurance. All mental health services are strictly confidential and provided only with the consent of parents or a legal guardian. FACS hired a data entry person to bill the mental health services under MediCal funding and to be the liaison between the FACS program and the state's MediCal program.

The Mental Health Unit occupies one large room at a site in West County, where records are kept and licensed clinicians and clinicians in training (interns) meet and work. Currently, FACS employs a maximum of 16 interns who work 15 to 20 hours per week. The clinicians in training have completed a master's program in clinical or professional psychology and are collecting clinical hours toward licensure by the Board of Behavioral Sciences. Each intern makes a one-year commitment to this paid internship program and receives a $500 stipend at the end of the year. The interns receive bimonthly training in play therapy and family intervention. Because there is much paperwork involved, interns receive not only clinical training but also training in MediCal procedures and charting. Licensed clinicians supervise the interns individually and in groups on a weekly basis.

The mental health interns are assigned to various sites throughout Contra Costa County. An intern observes a child and meets with both parents and staff to gather information about the child. Preschool children must be observed within the social context in which they live and grow up. Therefore, it is important for interns to establish good working relationships with parents and school staff to ensure that the child's needs are addressed, both in therapy and in the classroom.

Some sites have playrooms set up for individual play therapy. The rooms are furnished with sandtrays, dollhouses, art materials, and other materials to facilitate the child's safe expression of emotions. School sites without a playroom provide greater challenges because the clinician has to meet with the child either in a corner of the classroom or outdoors—weather permitting—to facilitate the child's play. To address this problem, the program is in the process of setting up a mobile unit and acquiring a van to be used as a playroom that can be moved to various sites in the county.

The internship program is an example of how FACS is meeting the growing needs of the children it serves and is seeking to expand this innovative Mental Health program.

For questions or information about the internship program, please contact Inge Lembeck, marriage family therapist and head of clinical services, at (925) 646-1444, extension 60991.

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California Early Start/Early Head Start Memorandum of Understanding

By Maryanne Doan, Director
Region IX Quality Improvement Center
for Disabilities Services

Early Head Start programs in California are mandated to serve infants and toddlers with disabilities. The performance standards set by the federal Head Start Bureau require the programs to allocate at least 10 percent of their placement slots to children with disabilities. The standards also require that Early Head Start programs collaborate with the state and local agencies responsible for delivering Part C services of the Individuals with Disabilities Education Act (IDEA) to the infants and toddlers eligible for such services.

In California the Department of Developmental Services (DDS) administers the Early Start program in cooperation with the California Department of Education's Special Education Division. Because Early Head Start is often the natural environment in which Part C services can be delivered, it is essential and beneficial for the Early Head Start and Early Start programs to coordinate their services for the benefit of the infants and toddlers they jointly serve.

A Memorandum of Understanding (MOU) was written to formalize the collaboration of statewide services for infants and toddlers with disabilities (from birth to 36 months of age) between the Early Head Start and Early Start programs and the following agencies: DDS; Head Start-State Collaboration Office; California Early Intervention Technical Assistance Network; Region IX Quality Improvement Center for Disabilities Services (QIC-DS); Region IX Administration for Children and Families (ACF, a part of the U.S. Department of Health and Human Services); Region XII of ACF, which oversees the Migrant and Seasonal Head Start (MSHS) programs in California; and Tribal Early Head Start in California.

A workgroup, consisting of most of the agencies listed above, was established in 1999 to design the MOU. An ad hoc committee, with representation from the regional centers, local educational agencies, and other interested parties, reviewed drafts of the MOU and provided substantial feedback toward the completion of the final document. The MOU was finalized for signature in the early part of 2002 and is now ready for dissemination to programs serving infants and toddlers with disabilities.

The MOU includes provisions for certain services at the state and regional levels and some recommendations for best practices in Early Head Start programs and regional centers in the following service areas:

- Child find and referral
- Assessment and eligibility determination
- Evaluation
- Individualized family service plan (IFSP)
- Service delivery and coordination
- Transition

In the case of IFSP, as an example of a service area, there is an agreement between the California DDS and the ACF Regional Office to develop regular communication and to share updates on related services and changes about their dual services to eligible children and families. At the local level, to ensure service coordination for each dually enrolled child, a best practice recommendation is for the Early Head Start and MSHS programs and their regional center partners to share information (with the consent of parents and families) about the children and families served.

The agreement also addresses the following areas:

- Personnel development, which includes sharing of information and training
- Dispute resolution
- Procedural safeguards
- Administration and monitoring of services

Other areas of the MOU discuss review of the agreement and its dissemination and implementation throughout California. Several valuable attachments accompany the MOU, including a glossary and a "side-by-side" (comparative analysis), which cites regulations from the Head Start performance standards and the federal regulations from Part C of IDEA for each service area covered by the MOU. The "side-by-side" is particularly valuable in assisting programs to understand the laws that govern delivery of services to children with disabilities and exactly what each agency is mandated to provide in terms of those services.

The MOU will be disseminated and discussed through the California Head Start Association conference, the Early Start training conducted throughout the state, the California Early Intervention Technical Assistance Network, and targeted QIC-DS cluster meetings.

For more information regarding the MOU or for some technical assistance in developing a local MOU between an Early Head Start program and its Part C regional center partner, contact the Region IX Quality Improvement Center for Disabilities Services, California Institute on Human Services, Sonoma State University, at the toll-free number (866) 306-4231.

Long Beach Unified School District Family Literacy Program

One rainy morning as we were walking to the bus stop, I decided to turn around and head back home. But Ashley would have none of that. She stood there with her hands on her waist demanding that we continue on our way to school. Three buses later, when we arrived at school, I realized that my daughter had already learned the importance of an education and the commitment it takes to succeed.

Carla Amador—Head Start Parent, Family Literacy Student, and Student Speaker at the 2000 National Center for Family Literacy Conference

By Roberta Lanterman, Family Literacy Coordinator, and Luanne Mauro-Atkinson, Head Start Assistant Director, Family Services, Long Beach Unified School District

Carla, Ashley's mother, is a testimony to the power of family literacy. She has benefited from the partnership that started between the Long Beach Unified School District (LBUSD) Even Start and Head Start programs. Over the past ten years, this partnership has blossomed and grown into a comprehensive family literacy program.

In 1992 LBUSD received its first Even Start grant. The district had also received a Head Start grant in 1990. In 1994 Roberta Lanterman, the LBUSD Even Start Coordinator, approached the Head Start program to develop a Memorandum of Understanding (MOU) between the two programs. Luanne Mauro-Atkinson, recently hired as the Head Start Social Services Manager, met with Roberta to write the MOU, which included cross-training and referral of families between Head Start and Even Start. That was the beginning of the family literacy partnership in Long Beach.

Fate played a part in the further development of this partnership. In 1995 four Head Start classrooms in downtown Long Beach were required to relocate to allow for the building of a new elementary school. The only available space for the four portables was on the campus of the LBUSD School for Adults. Max Fraley, the adult school principal, was eager to bring child care to the campus to assist adult students with young children. The new location enabled the adult education program to collaborate with the existing early childhood education program provided by Head Start in the family literacy partnership.

In 1996 the district was invited to submit an application for the Toyota Families for Learning grant that is based on the Kenan Model. The district had to add a parent education teacher through the adult school to have the required four components of the Kenan Model—early childhood education, adult education, parent education and support, and parent and child together (PACT)—in its family literacy program.

Over the past ten years, the partnership between the LBUSD Even Start and Head Start programs has blossomed and grown into a comprehensive family literacy program.

LBUSD was awarded a three-year grant that demonstrated an innovative partnership between the program components.

Ensuring adequate planning time between the partners became a key element of the program. PACT time in the Head Start classroom was a new concept that involved the Head Start and parent education teachers. Family literacy team meetings were held weekly to ensure that all requirements were being met and that communication was open and positive. It was no easy feat to work with administrators, teachers, and support staff from three large programs to coordinate schedules and services. However, with patience

(Continued on page 26)

Family Literacy Activities

By Margaret Noraas, Glenn County Office of Education, Department of Child and Family Services

The Glenn County Office of Education, Department of Child and Family Services, realizes the importance of early literacy and promotes family literacy activities throughout the program year.

Each Head Start center houses a lending library for parents to take books home to read to their children. Parent education connects the child and family in a partnership that strengthens the pleasure of reading for both children and parents through such activities as family field trips to the local library, where a storyteller reads to children, and the Share a Book Program, in which family literacy is celebrated with a four-week reading program in collaboration with local pizza parlors. Children are offered a free book of their choice. This program is designed to get more books into the hands of families.

Each year the Share a Book Program organizes a Family Literacy Night that brings participating children and families together for a celebration of song, dramatic storytelling, and dance. The event highlights the emerging world of language and literacy and offers families an opportunity to learn and enjoy literacy together. This event is a partnership of the Orland Masonic Lodge, the Lambda Iota Ladies Sorority, and the local literacy project partner. As in the Share a Book Program, children receive a free book.

The Department of Child and Family Services sponsors families in the Families for Literacy Program, which connects parents to literacy services and enriches their homes with new books. In collaboration with the Willows Literacy Project, Head Start families will be part of the Reading Is Fundamental book distribution program. The department is also coordinating with the Orland Library to increase the availability of culturally relevant books.

The Head Start centers are designed to support emergent literacy and the acquisition of language. Along with the various activities planned for the school year, each family receives periodic information and resources designed to encourage reading at home.

National and State Conference on Family Literacy—Together!

Presented by the National Center for Family Literacy and cosponsored by the California Department of Education

The National Center for Family Literacy (NCFL) is pleased to welcome the California Department of Education as a partner in the National Conference on Family Literacy. Together, they will integrate the richness of California's experience with the diverse resources of a national conference to be held March 16–18, 2003, at the Long Beach Convention Center in Long Beach, California.

The national conference is the premier event for family literacy in the nation, attracting a broad audience of practitioners, administrators, policymakers, and literacy experts each year. Participants will be able to:

- ✔ Choose from a wide array of exciting sessions highlighting national, state, and local strategies.
- ✔ Examine the latest research and policy in family literacy and related fields.
- ✔ Explore curriculum, instruction, and assessment frameworks on the education of children and adults.
- ✔ Discover new literacy activities to enhance parent and child interaction.
- ✔ Learn innovative ways to recruit families and garner community support.
- ✔ Expand their professional development.
- ✔ Enjoy networking opportunities.

For updates check the NCFL Web site <*http://www.famlit.org*>. Registration brochures will be mailed in September.

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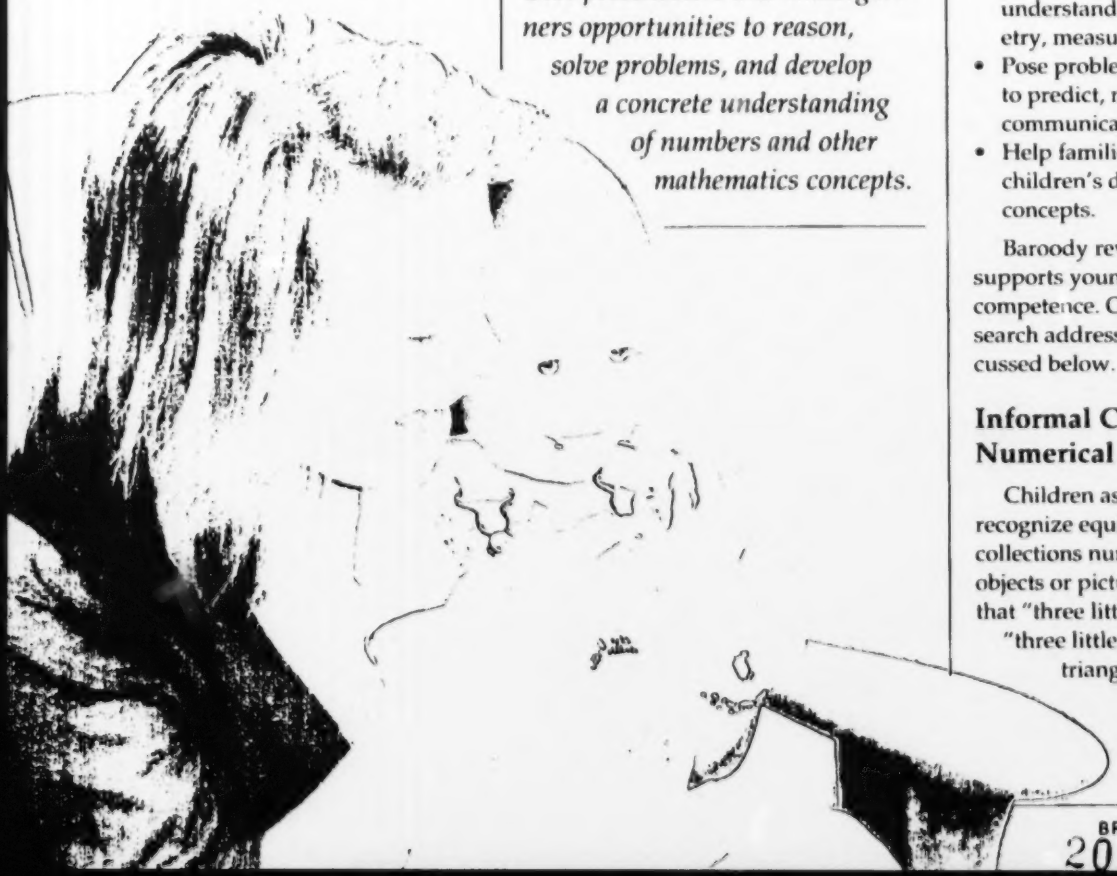
Summary of Research on Mathematics in Early Childhood

Young children need appropriate mathematics education. The California Department of Education's documents *First Class: A Guide for Early Primary Education* (1999) and *Prekindergarten Learning and Development Guidelines* (2000) offer guidance on appropriate mathematics instruction for young children. An article by Kathy Checkley in the Association for Supervision and Curriculum Development's (ASCD) document *Curriculum Update*, "Math in the Early Grades," and Arthur Baroody's *Young Children Magazine* article "Does Mathematics Instruction for Three- to Five-Year-Olds Really Make Sense?" (2000) provide additional information on research-based strategies for mathematics instruction. The authors stress the importance of giving preschoolers and kindergartners opportunities to reason, solve problems, and develop a concrete understanding of numbers and other mathematics concepts.

Give preschoolers and kindergartners opportunities to reason, solve problems, and develop a concrete understanding of numbers and other mathematics concepts.



A Foundation for Learning

Checkley states that educators of young children should do the following:

- Start providing opportunities for children to work with mathematics by age three or four.
- Make sure that children have a conceptual understanding of numbers before the introduction of symbols.
- Use play to build understanding and provide practice in newly acquired mathematics skills.
- Use manipulatives to enhance understanding of numbers, geometry, measurement, and patterns.
- Pose problems that enable children to predict, measure, reason, and communicate their solutions.
- Help families to emphasize children's discovery of mathematics concepts.

Baroody reviews recent research that supports young children's mathematical competence. One of the areas of research addressed by Baroody is discussed below.

Informal Concept of Numerical Equivalence

Children as young as three years can recognize equivalence between small collections numbering from one to four objects or pictures. They can recognize that "three little squares go here" and "three little squares go here but as a triangle" are the same, while

"three little squares go here" and "two little squares go here" are not.

Four-year-olds can compare two collections of different items and recognize the same number-name principle (i.e., the two collections are equal if they share the same number-name despite differences in physical appearances). Five-year-olds can typically name the number after another up to ten and compare two numbers to determine the larger or smaller number.

Given the research on the development of mathematics concepts, how should mathematics be taught in early childhood? Baroody strongly recommends an investigative approach consisting of the following components:

- **Positive disposition to learning and using mathematics.** Teachers and families help children develop the belief that everyone is capable of understanding mathematics and solving mathematical problems.
- **Understanding of mathematics.** Teachers and families help children relate school-taught symbols and procedures to their everyday lives, understand how different concepts are related (such as addition and subtraction), and learn the "whys" and "hows" of mathematics.
- **Mathematical inquiry.** Teachers and families help children make and test conjectures, find patterns in their own lives, solve problems, and reason. They also encourage young children to communicate their growing understanding about mathematics through drawings, words, and print.

Baroody suggests specific ways for early childhood educators to foster mathematical power through purposeful, meaningful, and inquiry-based instruction:

- Purposeful instruction uses everyday situations, children's questions, games, and literature. The teacher builds on what the children know to help them learn new concepts. For example, a preschooler asks his teacher how old he will be after his next birthday. Rather than simply giving him the answer, the teacher poses the question to his classmates, "Here is an interesting question. If you are three years old now, how can you figure out how old you will be on your next birthday?" The students discuss ideas, such as clapping out numbers in order, counting on the number line, or looking at the birthday chart for someone who used to be three. The teacher may follow up with another question, "If you are four, and your friend is five, how can we figure out who is older?"
- Meaningful instruction promotes children's informal mathematical knowledge and helps them see patterns and relationships. For example, a puppet might count "thirteen, fourteen, fiveteen" and preschoolers would laughingly point out its error.
- Inquiry-based instruction helps children by offering worthwhile tasks or questions, encouraging their reflection rather than the teacher's answers, and eliciting peer dialogue. Kindergartners and first graders might be assigned two or three homework problems in which they can illustrate their thought processes along with their solutions. For example, a student might be quizzed, "There are six children at our table. How many eyes are there?"

Preschoolers are capable of understanding mathematical concepts long before they attend school. It is important for preschool educators to use research-based strategies to enhance the achievement of young children in mathematics.

Sources

Baroody, Arthur J. "Does Mathematics Instruction for Three- to Five-Year-Olds Really Make Sense?" *Young Children*, Vol. 55, No. 4 (July 2000), 61–67. <*http://www.cde.ca.gov/elementary/matharticle.pdf* >

Checkley, Kathy. "Math in the Early Grades: Laying a Foundation for Later Learning," in *Curriculum Update*. Association for Supervision and Curriculum Development, Summer 1999.

Mathematics Resources and Web Sites

The following mathematics resources and Web sites contain valuable information on a variety of topics:

- The California Department of Education's Web site contains California's kindergarten through grade twelve content standards in mathematics, English–language arts, history–social science, science, and visual and performing arts at <*http://www.cde. ca.gov/board*>.
- The California *Mathematics Framework* and the *Mathematics Adoption Report* are available at <*http://www.cde.ca.gov/cfir*>.
- The National Council of Teachers of Mathematics' Web site <*http://www. nctm.org*> includes a variety of resources on mathematics, including the article "Mathematics in the Preschool," at <*http://my.nctm.org/eresources/journal_home.asp?journal_id:4* >.
- The *Head Start Child Outcomes Framework*, which includes several outcomes related to mathematical concepts and skills, is available at <*http:/www. headstartinfo.org/publications/im00/imcont00.htm*>.
- The Eisenhower National Clearinghouse for Mathematics and Science Education's Web site contains curriculum resources, Web links, and a link to *Focus Magazine*. Visit the Web site at <*http://www.enc.org/classroom/index*>.
- The California Mathematics Council Web site, which contains publications, online resources, and discussion groups, is at <*http://www.cmc-math.org/*>.
- The California Mathematics Project's Web site contains information on professional development activities, California standards and frameworks, and lesson study. The site is at <*http://csmp.ucop.edu/cmp/index.php*>.
- The Private Universe Project in Mathematics airs regularly on the Annenberg/CPB Channel (a free digital satellite channel available to schools and communities across the country). The project includes a

(Continued on page 27)

22

By Sue Shaw
Coordinator/Instructor,
Fresno City College/Head Start
Partnerships

The Head Start Act was amended in October 1998 to ensure that (1) classrooms in center-based Head Start programs are assigned one teacher who has demonstrated competency to perform specific functions; and (2) no later than September 30, 2003, at least 50 percent of all Head Start teachers nationwide have an associate, baccalaureate, or advanced degree in early childhood education or in a field related to early childhood education with experience in teaching preschool children.

In 1997 the Head Start Bureau launched the Head Start Higher Education Partnerships Program with the award of grants to eight historically black colleges and universities to expand professional development opportunities for Head Start staff and parents. Two years later the partnerships program grew to include tribally controlled land grant colleges and universities, and in 2000 it expanded still further to include institutions of higher education serving Hispanic/Latino students.

Currently 60 grants are awarded to 52 institutions of higher education involved in increasing educational opportunities for Head Start staff and parents. Of the 12 institutions serving Hispanic/Latino students under this program, seven are in California: California State University (CSU), Bakersfield; CSU, Northridge; CSU, San Marcos; Fresno City College (FCC); and Hartnell and Yosemite community colleges. Each institution has developed educational models, technological models, and/or models for culture and language preservation to support the teaching staff of their partnering Head Start program.

The Partnership

Fresno City College and Fresno County Economic Opportunities Commission (EOC)/Head Start Program entered into a partnership to provide a series of courses and support services to help Head Start teaching staff earn associate of science degrees in child development or continue their education toward a bachelor's degree. The Head Start Bureau has awarded FCC a four-year grant for the period from October 1, 2000, through September 30, 2004, to support this collaborative effort.

Currently 60 grants are awarded to 52 institutions of higher education involved in increasing educational opportunities for Head Start staff and parents.

Fresno County Head Start serves 2,555 families in center-based programs and 564 families in home-based programs. Hispanics compose 64 percent of the families served and 58 percent of the educational staff. Fresno County EOC/Head Start center-based programs had already met the 2003 mandate when the partnership began. Sixty-three percent of their Head Start teachers had already obtained an associate's degree or higher in child development or a related field; however, only 9 percent of the teacher's aides had degrees. At conception of our grant, we proposed a series of courses and support services to provide for the continued education of 60 teacher's aides and 30 teachers toward an associate of science degree in child development and to move the remaining 55 teacher's aides to a California Child Development Permit—Teacher level.

Success in the Making

We are currently 18 months into our grant. Eighty-six percent of Fresno County Head Start's center-based teachers and 20 percent of the teacher's aides have an associate's degree in child development or a related field. (Note: The growth does not reflect degrees earned only as a result of this grant. Some teachers have left and others with degrees have been hired. Several aides who received their degrees last year are now teachers and are not counted in the teacher's aide numbers.) Additionally, we have broadened our target population to include the 50 home-based staff. Currently 194 staff members are using the project services. There are 15 staff members with an Associate in Science degree who have borrowed books from the lending library to assist them with transfer classes needed to move toward their bachelor's degree.

Lessons Learned

When we began our project, we first went to the Head Start teaching staff to ask them what the barriers were to continuing their education. They told us lack of money was an issue. Specifically, we found that the process of accessing monies through grants and agencies was often so cumbersome that staff often had to pay for their textbooks up front and wait for reimbursement. We developed and implemented a lending library jointly funded by the grant and the Head Start partner. The first semester 51 staff members borrowed books for 76 classes.

We knew that asking staff members to come to the college and meet with advisers would be extremely difficult because of staff work schedules and the

(Continued on page 22)

Head Start–Higher Education Partnerships

(Continued from page 21)

long distances to many of the rural sites. Therefore, I go to them. Meeting staff where they are has allowed me to develop an individual educational plan with each participant.

We developed and implemented a lending library jointly funded by the grant and the Head Start partner. The first semester 51 staff members borrowed books for 76 classes.

Other forms of support that have proved to be quite successful are short-term Friday evening/Saturday morning course offerings and assistance with both applications and fees to obtain California Child Development permits. For some a contact person at the college has eliminated their fear of returning to the classroom after an absence of many years.

A Win-Win Project

When one works for a college, she or he quite naturally thinks in terms of projects that will meet the goals of the institution. Likewise, coming from a management position in a Head Start program, I know that agencies make programmatic decisions based on what is best for their programs' children and families. A project like this is a win-win situation for everyone: the college gains enrollment; the Head Start Program meets the educational mandates of having competent staff with education degrees; the staff are empowered and supported to reach their goals; and most important, the children and families served reap the benefits of having a teaching staff that is qualified, culturally sensitive, culturally diverse, and up-to-date on the best practices. This is a project that could and should be replicated throughout the country for the benefit of all.

For additional information, contact <sue.shaw@scccd.com>.

Professional Development Resources

By Linda Butterfield, Director Child Development Training Consortium

The Child Development Training Consortium (CDTC) was created in 1987 to address the critical shortage of qualified child care workers in California. We are still striving to achieve that goal. We are here to assist and support all child care/development professionals throughout California.

CDTC is funded by the California Department of Education, Child Development Division, with help from federal Child Care and Development Quality Improvement funds. CDTC will continue to offer a variety of professional development resources in 2002-03.

Child Development Permits

Beginning August 1, 2002, CDTC will again have funding available to pay the permit application and fingerprint (Live Scan) processing fees for the six personnel levels of the Child Development Permit Matrix: assistant, associate teacher, teacher, master teacher, site supervisor, and program director. CDTC will pay the fees for first-time permits, permit renewals, and permit upgrades. A one-year window of opportunity will be available to obtain the three higher-level permits. To request a permit application packet after August 1, 2002, please call Kimberly Baker at (209) 572-6080.

Professional Growth Advisors

CDTC professional growth advisors continue to offer training and networking sessions throughout California. A Professional Growth Advisor Registry, which lists the names of available advisors who have been trained through CDTC, is available at CDTC's Web site <*http://www.childdevelopment. org*>. A calendar of scheduled adviser training and networking sessions is also available on the Web site. For more information, contact Miriam Medina at (209) 341-1662.

Career Incentive Grants

Effective August 1, 2002, there are four new priorities for receiving a Career Incentive Grant through CDTC. In priority order, they are as follows:

1. Employees of programs funded by the California Department of Education, Child Development Division (CDE/CDD), who are recipients of permit waivers issued by CDE/CDD (Students may attend community colleges or four-year colleges or universities.)
2. Employees of CDE/CDD–funded programs who are attending non-CDTC community colleges
3. Employees of CDE/CDD–funded programs who are attending four-year colleges or universities
4. Employees of child care/development programs not funded by CDE/CDD who are attending non-CDTC community colleges

The grant limit per year for community college students is $300. The grant limit per year for four-year college or university students is $800. To obtain a Career Incentive

(Continued on page 27)

CALIFORNIA HEAD START-STATE COLLABORATION OFFICE

READER QUESTIONNAIRE

One of CHSSCO's most important efforts is to provide useful information and materials to the early care and education community. We want to know how we are doing! By completing this short questionnaire, you will help us learn how we can continue to provide the best services possible. *Thank you!*

Please return completed questionnaire to:
Michael Zito
CDE/CDD
560 J Street, Suite 220
Sacramento, CA 95814

After October 1, 2002, please return completed questionnaire to:
Michael Zito
CDE/CDD
1430 N Street, Suite 6308
Sacramento, CA 95814

Date: _____

TYPE OF AGENCY OR AFFILIATION

- ❑ Head Start
- ❑ College or university (center)
- ❑ College or university (faculty)
- ❑ Private/nonpublic funded
- ❑ Family child care home
- ❑ State Preschool
- ❑ Other state government

1 Please check the box that best describes your role:

- ❑ Nurse/health specialist
- ❑ Educator/teacher
- ❑ Resource teacher
- ❑ Administrative staff
- ❑ Social services/parent involvement specialist
- ❑ Family service worker
- ❑ Other (specify)

_____

2 In the table below, check the box that best describes how much you feel you know about best practices in the following three areas*:

	I know a tremendous amount.	*I know quite a bit.*	*I know some.*	*I need to know more.*
Childhood obesity				
Children's oral health				
Children's mental health and behavioral patterns				

*In the coming year, CHSSCO will conduct activities addressing best practices in these areas.

3. In the table shown below, check the box that best describes how your knowledge level in the following four areas has changed:

	Knowledge has increased during the past year.	*Knowledge has stayed the same for the past year.*	*I need to know more.*
Partnerships for full-day/full-year services			
Child outcomes/Desired Results Developmental Profile Plus			
Early Head Start–Early Start collaboration/ Memorandum of Understanding			
Professional growth and development resources			

4. For the past year, where did you receive information about best practices related to early care and education, and how helpful was it? (Check *all* that apply.)

Source	*Very helpful*	*Somewhat helpful*	*Not very helpful*	*Not applicable*
Bridges newsletter				
CA Head Start Association newsletter				
National conferences				
State or local conferences, workshops, summits, or roundtables				
Materials from Quality Improvement Centers				
Peers/colleagues in the field				
ListServs or the Internet				
Other(s)				

5. Are there any specific topics or areas that you would like to be discussed in *Bridges*?

❑ Yes ❑ No

If yes, what topics or areas?

_____

_____

6. I usually find the materials and information in *Bridges* to be:

❑ Stimulating
❑ Boring
❑ Of some interest but sometimes not

7. When I receive *Bridges* I do one or more of the following: (Check *all* that apply.)

❑ Always read it cover to cover
❑ Sometimes read it cover to cover
❑ Scan it for items of interest
❑ Don't read it at all
❑ Keep issues on file for future reference
❑ Read or scan, then throw away or give to others to read

Contra Costa Receives "National Program of Achievement" Award

By Mary Jane Robb
Contra Costa County Community Services Department

In April the Contra Costa County Head Start and Early Head Start programs, administered by the county's Family and Children's Services (FACS) Division, received the Program of Achievement award from the National Head Start Association (NHSA)—the first to be awarded in California.

Through its Quality Initiative program, NHSA recognizes programs that have achieved quality standards in program design, program systems, and program management and in services to children and families. The initiative has two levels of recognition—Program of Achievement and Program of Excellence.

To be recognized as a Program of Achievement, a Head Start program must respond to 77 achievement indicators. To achieve the next level of recognition—Program of Excellence—current awardees of the Program of Achievement must evaluate the impact of their Head Start services, verify classroom quality, and define further their initiatives for enriching and sharing their program with the early childhood community. An independent panel of early childhood experts reviews all applications received by the Quality Initiative program.

FACS began planning for the Quality Initiative award in February 2001. A team of more than 60 staff members from various levels of the organization collaborated in developing a comprehensive assessment of their Head Start and Early Head Start programs. In the course of eight months, the team members wrote a narrative response to each of the 77 achievement indicators and collected supporting documentation as proof of their program's excellence. By October 2001 the 181-page narrative was completed and was sent, along with six boxes of supporting documentation, to NHSA's office in Virginia. News of the award came in February 2002.

FACS provides quality services to 2,020 Head Start and Early Head Start children and their families and more than 1,000 California Child Development slots in 24 sites in the county. Program models include full-day/full-year center-based, home-based, and family child care programs.

NHSA recognizes programs that have achieved quality standards in program design, program systems, and program management and in services to children and families.

The Contra Costa FACS has been recognized by the federal Department of Health and Human Services' Administration for Children and Families for exemplary practices in community collaborations, including partnerships with school districts, community college districts, private nonprofit groups, and other county departments. Through such collaborations FACS ensures that all eligible families have the opportunity to benefit from the extensive services offered. Contra Costa has also received the California Child Care Administrators' Association 2002 award for collaborations in the community.

Contra Costa's innovative collaborative funding model has enabled the county to move its program from 60 percent to 98 percent full-day/full-year service in three years and extend quality, comprehensive services to approximately 700 additional families in the community. Contra Costa has 11 more centers at various stages of development, one of which is a $5.5 million two-story, state-of-the-art building with ten classrooms that is scheduled to open in the spring of 2003.

Innovation has not stopped at collaborations. Through the insight of the staff of its mental health and disabilities services, Contra Costa became the first Head Start program to become a MediCal (California's Medicaid program) provider through the MediCal Administrative Activities program. The county estimates that this initiative will bring close to $500,000 additional funding for the program, allowing the staff to do outreach and expand disability services to a larger group of qualified families in the county.

Technology has also been a key component to the success of the Contra Costa program. The county has been a leader in technological advancements for the Head Start program. Each of the 70 classrooms has at least two computers that are equipped with age-appropriate curriculum software to assist teachers in lesson planning and to familiarize children with computer systems. And the county is leading the development of a Web-based outcomes measurement model.

Last fall at the Head Start Technology Conference in Washington, D.C., Contra Costa presented its recently developed Web-based Intranet system, designed as a *paperless* office system for purchase orders, payroll reporting, and lesson planning—to name a few of the functions.

Long Beach Family Literacy Program

(Continued from page 16)

and tenacity the family literacy program in Long Beach has continued to thrive.

In 1998 the National Center for Family Literacy invited the Long Beach program to be one of five pilot sites nationwide to apply for a new Knight Foundation grant. This invitation provided LBUSD the opportunity to evaluate welfare reform and its family literacy program in order to provide a work-focused family literacy program.

With patience and tenacity the family literacy program in Long Beach has continued to thrive.

At this point Judy Carey, City of Long Beach Welfare to Work Coordinator, joined the partnership and was instrumental in bringing additional resources and new sources of funding. The grant was awarded, and a new program entitled LiteracyWorks was born. The grant added a new position, the literacy liaison, to ensure that the participants completed all work activities and family literacy requirements. The work focus added a new dimension to family literacy.

The Welfare to Work program also collaborated directly with the Head Start program to use Temporary Assistance for Needy Families (TANF) support services monies to fund a portion of a teaching team to extend the part-day Head Start classroom to a full-day one. This innovative use of funds provides full-day child care to families co-enrolled in Head Start and the Welfare to Work program.

Sustainability became key to ensure ongoing program success. In 2000 the City of Long Beach applied for and received its own Even Start grant to further support the work-focused program. LBUSD received its third cycle of Even Start funding in 2001. The Los Angeles County Children and Families First Commission in 2002 recognized LiteracyWorks as one of 15 model programs. LiteracyWorks received monies from the commission to enhance and expand its existing program. Despite many challenges, the partnership has become a model for the County of Los Angeles.

Many families in the Long Beach community are in need of the LBUSD program. The staff hope that many more families like Carla Amador's will have the opportunity to share the value of education with their children. The Head Start program is no longer limited to providing family literacy services in a single classroom. As a result of additional positions, such as the literacy liaison and a Head Start family literacy specialist established through new grants, family literacy services are available to all 2,232 families program-wide. The program will continue to grow as additional funding is identified.

Over the course of its development in the past ten years, the LBUSD Family Literacy Program has enhanced the philosophy, resources, and services of all the collaborating partners. In particular, Head Start staff have received training that has broadened their knowledge and skills and allowed them to be proactive and innovative in their approach to early literacy and school readiness. And Head Start parents have benefited from the collaboration and integration of services that have allowed them to enter the workforce with the necessary skills and abilities and a belief in themselves that fosters life-long learning.

Transition to School

(Continued from page 3)

Even Start Family Literacy programs, Head Start programs, or state-supported preschool programs. Schools held family orientation sessions that included a classroom tour, information on state standards, and a short video on beginning kindergarten. Each child received a "Transition to School" kindergarten backpack.

The 15-minute video, *Charting the Course—The Journey Begins*, follows two children on their first day in kindergarten. To obtain the video in English or Spanish from the San Diego County Office of Education, call (858) 292-3548.

The kindergarten backpack included a variety of educational items for use in helping children learn the alphabet, identify numbers and shapes, improve oral language and vocabulary, and use arts and science materials. Parents were given English or Spanish activity cards that explained additional uses of the materials. These educational items, distributed before the start of the school year, helped the children to begin school with confidence.

A more thorough description of the project, including a list of books to read to children about starting school, may be viewed on the CDE Web site <*http://www.cde.ca.gov/elementary/transition/*>.

More information about transition to school is available in the California Department of Education's document *Continuity for Young Children: Positive Transitions to Elementary School* (1997). This document provides guidelines for and examples of successful transition programs and activities for children making the transition to kindergarten. The publication may be ordered from CDE Press by calling (800) 995-4099.

Even Start and Transition to Kindergarten

(Continued from page 3)

- In the spring kindergarten teachers visit the Head Start and preschool classrooms.
- Head Start and preschool students are preregistered for summer school and for kindergarten for the following school year.
- Kindergarten teachers arrange to meet with the families of preregistered students before the summer.
- Parents are provided with an overview of the kindergarten goals and standards. A list of desired readiness skills is given to the parents so that they may work with their children at home.
- The Even Start Family Literacy Project provides for families a summer program with readiness activities in reading, writing, and math.
- Parent-child interactive literacy activities are offered to families during the evening.

These services and activities help to better prepare students entering kindergarten in the fall. Furthermore, parents are better informed and therefore are better able to care for their children. Parents who are more informed tend to have students that perform better in school.

News from the California Head Start Association

(Continued from page 1)

leadership the Neighborhood House Association has pioneered many progressive and innovative operation models, partnerships, and cutting-edge, goal-driven service delivery.

The newly elected treasurer is Lucia Palacios, the executive director of the University of Southern California School for Early Childhood Education, Head Start and State Preschool. She brings tremendous experience in early care and education as a former National Head Start Fellow (1998) to her new position. During her stint at the Head Start Bureau in Washington, D.C., she was privileged to work closely with Helen H. Taylor, former associate commissioner, to assist in structuring the Early Head Start development and monitoring processes.

Complementing the Executive Committee leadership is the ongoing participation of our past president Ray Hernandez, manager of Family Services in Ventura County. Mr. Hernandez continues to be an advocate for the comprehensive, family-based service delivery that, we all believe, is the core of our Head Start tradition.

In the coming months CHSA will be active in a variety of areas. Please take a moment to check our Web site *<http://www.ca-headstart.org>* for up-to-date information and resources. We also encourage you to review the monthly *Advocacy Update* or other hot topics emerging in the Head Start community.

This summer CHSA hosted roundtables on CalWorks, human resources, and Children and Families Commission. Each roundtable is designed to provide Head Start field personnel with the latest information on early care and education, promising practices, and barriers to program development. In partnership with the Development Associates/Region IX Head Start Quality Improvement Center, CHSA is working hard to support the growth and continued success of your agency. Please note that our Fifth Annual Conference will be held in Sacramento on January 21–24, 2003. Mark your calendars today!

CHSA is closely monitoring the course that is being set for Head Start by the national administration. We will continue to bring a positive, solutions-based approach to the national dialogue. Please feel free to contact me at (925) 646-5989 or *<pstro@ccccsd.ord>* with your thoughts and ideas on how CHSA can best serve our community.

I look forward to working closely with the child care community, our state partners, and our regional and national colleagues in the months to come.

Mathematics Resources and Web Sites

(Continued from page 19)

one-hour PBS documentary, a series of six kindergarten through grade twelve teacher video workshops, and a companion interactive Web site. More information is available at *<http://www.learner.org/channel/workshops/pupmath/>*.

Professional Development Resources

(Continued from page 22)

Grant application after August 1, 2002, please contact Gail Brovont at (209) 572-6086.

Community College Programs

In 2002-03, CDTC will again contract with 94 community colleges to help CDTC-eligible students complete the course work necessary to obtain child development permits. This assistance varies from campus to campus but usually includes reimbursement of tuition and sometimes book costs, access to textbook lending libraries, and provision of courses not funded by the college budget but needed by students. For assistance in locating a participating community college near you, please call Barbara Wolf at (209) 572-6083.

Administrator Institutes

CDTC will again offer ten administrator institutes during 2002-03. Three will be three-day institutes on Stephen Covey's work *The 7 Habits of Highly Effective People*, one will be a three-day institute on Franklin Covey's *The 4 Roles of Leadership*, and six will be two-day institutes offered in spring 2003. The topics of the spring institutes have not yet been determined. These institutes are designed to enhance the leadership and management skills of program directors and site supervisors. For more information after August 1, 2002, please contact Gail Brovont at (209) 572-6086.

For More Information

For more information about CDTC program services or to view the Child Development Permit Matrix in English, Spanish, or Chinese, please visit the CDTC Web site *<http://www.childdevelopment.org>*.

Web site <http://www.cde.ca.gov>.

Head Start Resources

The California Head Start Association maintains a Web site listing California Head Start program statistics, including funding and number of children served, and other information at <*http://www.ca-headstart.org*>.

Development Associates, the Head Start Quality Improvement Center for Region IX, has an online listing of California's Head Start grantee and delegate agencies and a master calendar of Head Start and other early education conferences at <*http://www.devassoc.com*>.

And the national Head Start calendar of events is now available online at <*http://www.hsnrc.org*>.

Literacy

The Head Start Quality Improvement Centers will be using the University of Houston's CIRCLE Project as part of Head Start's new early literacy initiative. The CIRCLE Web site is <*http://ped1.med.uth.tmc.edu/circle/index.htm*>.

Webbing into Literacy is a downloadable program designed to provide teachers in rural Head Start programs with materials and instruction that they can use in their early literacy activities. Visit the Web site at <*http://curry.edschool.virginia.edu/go/wil/home.html*>.

HeadsUp! Reading can be delivered live, simultaneously in English and Spanish, to early childhood sites across the nation. Teachers at Head Start, child care, and other early education program sites have taken the course, which will be offered again in 2003. To learn more, go to the Web site <*http://www. huronline.org*>.

Raising a Reader is an early literacy program that is being used in many early education programs and is funded through a social venture fund of the Center for Venture Philanthropy. Visit the Web site at <*http://www.raisingareader.org*>.

Early Educators

The Center for Children and Families has launched a new Web site designed to address the cultural and linguistic needs of Latinos working in early childhood settings. Visit the Web site at <*http://www.edc.org/ccf/latinos*>.

Early Education Research

State Health Facts Online is a free Internet resource of the Kaiser Family Foundation designed to give journalists, state and federal policymakers, researchers, and the general public access to health policy information in all 50 states. Users can view information for a single state or can compare and rank data from across the nation. View the data at <*http://www.statehealthfacts.kff.org*>.

Data from the Census 2000 Supplemental Survey offer a first look at state-level changes in 11 key measures of child and family well-being between 1990 and 2000. View the data at <*http://www.aecf.org/kidscount/c2ss/*>.

Mental Health—Social and Emotional Development

Bright Futures in Practice: Mental Health is a guide and tool kit for health professionals, families, and others concerned with specific mental health problems affecting children and adolescents. The guide is available from the National Center for Education in Maternal and Child Health. Visit the Web site at <*http://www.brightfutures.org/mentalhealth/index.html*>.

The Center on the Social and Emotional Foundations for Early Learning focuses on strengthening the capacity of Head Start and other early education providers to improve the social and emotional outcomes for young children. For more information, go to the Web site at <*http://csefel.uiuc.edu*>.

Fatherhood

The Web site of The Fathers Network, dedicated to celebrating and supporting fathers and families raising children with special health care needs and developmental disabilities, is at <*http://www.fathersnetwork.org*>.

Marriage

Research confirms that children's development is enhanced by growing up in families formed by both biological parents in a low-conflict marriage. Both parts of this equation are important, but there is no consensus on how to form and maintain strong, healthy marriages. Child Trends "is dedicated to improving the lives of children and families by providing research and data to inform decision making that affects children." View the Child Trends marriage fact sheet at <*http://www.childtrends.org*>.

Health, Nutrition, Obesity

The publication *Guidelines for Comprehensive Programs to Promote Healthy Eating and Physical Activity* was recently released by a work group representing state and local public health officials. The publication will be useful for developing comprehensive nutrition and physical activity efforts in various settings. View and download information at <*http://www.astphnd. org*>.

The American Dietetic Association's Web site includes daily nutrition tips, research information, nutrition publications, and a referral service to locate registered dieticians. The Web site is at <*http://www.eatright.org*>.

The Web site of the American Diabetes Association, which provides diabetes research, information, and advocacy, is <*http://www.diabetes.org*>.

Poison Help is the new nationwide contact for information and advice in the event of a poison exposure. For the first time, callers in the United States, Puerto Rico, and the Virgin Islands can quickly reach U.S. poison control centers through one hotline 24 hours a day, 7 days a week. Callers are automatically connected to the poison center for their area. The national telephone number is 1-800-222-1222. For more information, visit the Web site at <*http://www.1-800-222-1222.info/*>.

The American Academy for Pediatrics and the American Public Health Association have revised *Caring for Our Children: National Health and Safety Performance Standards for Out-of-Home Child Care*, the definitive reference to health and safety standards in child care, including standards, rationale, comments, and resources. For more information, visit the Web site at <*http://www.apha.org*>.

B R I D G E S

Bridges is produced by the California Head Start-State Collaboration Office (CHSSCO), which was created to promote partnerships between Head Start and the larger child care and development community at the state and local levels. *Bridges* is funded by the U.S. Department of Health and Human Services, Administration for Children and Families, and the California Department of Education, Child Development Division. The opinions expressed are those of the authors and not necessarily those of the Department. CHSSCO is located in the Child Development Division, 560 J Street, Suite 220, Sacramento, CA 95814.

Michael Jett, Director
Child Development Division
(916) 322-6233

Michael Silver, Administrator
Policy, Program, and Legislation Development Unit
Director, CHSSCO
(916) 322-6233

Michael Zito, Coordinator
CHSSCO
(916) 323-9727

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